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COORDINATION QUESTIONS: MULTISECTORAL COLLABORATION ON TOBACCO OR HEALTH

Progress made in the implementation of multisectoral collaboration on tobacco or health

Report of the Secretary-General

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I. BACKGROUND

1. At its substantive session of July 1993, the Economic and Social Council adopted resolution 1993/79 on multisectoral collaboration on tobacco or health. In operative paragraph 3 of that resolution, the Council requested the Secretary-General to seek the full collaboration of the World Bank, the Food and Agriculture Organization of the United Nations (FAO), the General Agreement on Tariffs and Trade (GATT), the International Labour Organization (ILO), the United Nations Conference on Trade and Development (UNCTAD), the United Nations Development Programme (UNDP), the United Nations Industrial Development Organization (UNIDO), the World Health Organization (WHO), other United Nations organizations and other international organizations, as appropriate, in contributing to the successful implementation of effective comprehensive strategies through multisectoral collaboration among international agencies.

2. In paragraph 4, the Council requested the Secretary-General to establish, under the auspices of WHO and within existing resources, a focal point, within existing institutions of the United Nations system, on the subject of multilateral collaboration on the economic and social aspects of tobacco production and consumption, taking into particular account the serious health consequences of tobacco use.

3. In paragraph 5, the Council suggested that the multisectoral collaboration coordinated through the United Nations system focal point seek to offer practical advice and assistance to Member States, at their request, on how they could implement or strengthen comprehensive national tobacco control strategies.

4. In paragraph 8, the Council requested the Secretary-General to ensure that each contributing agency, in consultation with concerned Member States, together with the focal point, develop individual plans of work, setting out deadlines and achievement milestones, for its contribution to multisectoral collaboration on tobacco or health that would lead to a rapid reduction in the burden of disease and death caused by the tobacco pandemic, while giving due consideration to any economic adjustments that might arise from a reduction in the demand for tobacco products.

5. Given the UNCTAD mandate in the area of commodities and the need to examine the economic adjustments that countries may need to undertake in the follow-up to the resolution, a focal point within UNCTAD was designated to undertake the coordination and follow-up responsibilities emanating from Council resolution 1993/79.

II. FOLLOW-UP TO THE IMPLEMENTATION OF COUNCIL RESOLUTION 1993/79

6. Communications were sent to all ACC member bodies and participants to inform them about both the contents of Council resolution 1993/79 and the establishment of a focal point within UNCTAD, as well as to seek their full collaboration, as appropriate, in contributing comprehensive strategies in the area of tobacco or health through multisectoral collaboration among themselves.

The letter also requested each contributing agency to develop individual plans of work for its contribution to multisectoral collaboration on tobacco or health. Subsequently, two further communications were sent out to all agencies by the focal point, offering cooperation in preparing the individual plans of work requested in the resolution. At the time of preparation of the present report, 20 replies had been received.

A. Summary of exchanges of correspondence and direct contacts with all ACC bodies and organizations and bodies of the United Nations system

7. Of the 36 organizations and bodies contacted (see list in annex I), so far 20 have sent replies, of which six submitted individual plans of work or equivalent documentation (FAO, the International Civil Aviation Organization (ICAO), UNCTAD, the United Nations Children's Fund (UNICEF), UNIDO and WHO), while five (the ILO, the World Bank, the United Nations Educational, Scientific and Cultural Organization (UNESCO), the International Trade Centre (ITC) and the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat) manifested a keen interest in cooperating with WHO and the focal point in the development of programmes to reduce tobacco consumption.

8. A number of other organizations and bodies, namely the Economic Commission for Europe (ECE), the Economic Commission for Latin America and the Caribbean (ECLAC), the Economic Commission for Asia and the Pacific (ESCAP), the International Maritime Organization (IMO), UNDP, the United Nations Environment Programme (UNEP), the United Nations Population Fund (UNFPA), the World Food Programme (WFP) and the World Meteorological Organization (WMO), while supportive of the aims of Council resolution 1993/79, considered that the scope of work fell outside their areas of competence or that they had neither mandates nor resources to submit individual plans of work.

1. World Health Organization

(a) The problem

9. Currently, tobacco use is estimated to account for 3 million deaths per year, about two thirds of those occurring in the developed world, where the cumulative exposure (primarily to smoking) has been much higher than in the developing world. Over the past decade, there have been very significant changes in consumption patterns in many developing countries, with an increase in consumption and the prevalence of smoking.

10. Given those trends, the annual number of tobacco-related deaths at the global level is expected to rise dramatically from 3 million to about 10 million by the 2020s. Only if there were a very substantial fall in smoking prevalence would that pandemic of smoking-induced deaths be tempered.

(b) WHO response: tobacco or health programme

11. As early as 1970, the World Health Assembly expressed concern at the serious health effects of smoking. It also requested the Director-General of WHO to bring to the attention of FAO the need for studying crop substitution in tobacco-producing countries.

12. Since then, a number of World Health Assembly resolutions have been adopted as a clear demonstration of the ongoing concern of WHO and the ethical and political priority given to the health and socio-economic consequences of tobacco production and consumption.

13. In response to World Health Assembly resolution WHA41.25, a Plan of Action on Tobacco or Health for 1988-1995 was developed, setting up the contents and directions of WHO in the field of tobacco control and including a description of the main components of the WHO programme in the field of tobacco control: the development and strengthening of comprehensive national tobacco control programmes, advocacy, health education and public information, and clearing-house and data centre activities.

14. WHO has endeavoured to move the tobacco or health agenda towards the problem of protecting the developing countries, which can still avoid the looming tobacco epidemic. Finally, a global strategy of health protection and promotion will give priority to women and children.

(c) Activities planned for 1994

15. The following activities are planned in the area of national tobacco control:

(a) Preparation of a draft publication on guidelines for tobacco control and epidemiological surveillance, intended mainly for use by public health officials in WHO regional offices and member States;

(b) Collaboration in the development and strengthening of national tobacco control programmes, including on-site assistance, in Member States, upon request. Priority will be given to developing countries and countries of central and eastern Europe.

16. The following advocacy activities are planned:

(a) Publication and distribution of printed and other audiovisual materials in support of World No-Tobacco Day 1994: "The media and tobacco: getting the health message across";

(b) Publication and distribution of the quarterly WHO/TOH newsletter Tobacco Alert;

(c) Promoting the implementation of the WHO resolution in which the World Health Assembly called for a ban on the sale and use of tobacco products in the United Nations workplace;

(d) Providing support to:

(i) The United Nations Secretariat and UNCTAD for the operation of the United Nation focal point on tobacco, as called for in Council resolution 1993/79;

(ii) ICAO, in the implementation of the WHO resolution in which the World Health Assembly called for a ban on smoking on international flights by 1 July 1996;

(iii) The World Bank, in implementing tobacco control activities, as set out in its World Development Report 1993: Investing in Human Health.

17. The following clearing-house and data centre activities are planned:

(a) Preparation of a first draft of a world atlas on tobacco or health;

(b) Preparation of a variety of data analyses and information materials to support advocacy and tobacco control activities;

(c) Participation in the development of a world-wide network of prospective studies on tobacco or health in developing countries and the improvement of assessments of the global and regional burden of disease due to tobacco use.

(d) Resources

18. The above-mentioned activities will be accomplished with current resources from the WHO regular budget and extrabudgetary funds from various sources.

19. All WHO regional offices are very active in supporting the tobacco control efforts of Member States and provide support in such areas as the sponsorship of regional meetings, the distribution of publications dealing with tobacco control subjects and the eventual employment of consultants.

(e) Achievements and milestones

20. Several countries have tobacco control programmes and are very active in the effort to promote a tobacco-free society and to establish the non-use of tobacco as normal social behaviour. However, only a limited number could be seen as promoting comprehensive programmes as described in WHO resolutions WHA39.14 and WHA43.16.

21. Therefore, WHO will seek to increase the number of countries with national programmes for the prevention and reductions of tobacco use to 50 per cent of member States by the year 2000.

2. Food and Agriculture Organization of the United Nations

22. FAO work on tobacco on behalf of member Governments falls into two broad areas, namely production and marketing.

23. Because of its relatively high price, short production cycle and suitability for using surplus labour, tobacco is often a very attractive crop for smallholders. However, if the production and use of tobacco are to be reduced because of its negative health effects world wide, producers, especially smallholders, will need to diversify their production systems in favour of other high-return cash crops in order to protect their livelihoods. Since it is unlikely that any single crop could replace tobacco as a comparable income source, it is necessary to consider a wide range of lesser cash crops to serve specialized market niches. FAO stands ready, subject to the availability of funds, to respond to the request of any member Government wishing to investigate options for diversification away from tobacco products.

24. In its commodity analysis work, FAO regularly monitors the marketing situation and outlook for tobacco and can provide, on request, information on market opportunities for alternative crops.

25. In its response, FAO also suggested that the focal point on tobacco or health should make concrete proposals for inter-agency consultation and system-wide collaboration, taking into account the fact that individual plans of work are already being developed within the programmes of work and budgets of the various agencies, although those plans refer to sectoral activities. The question is how to advance a multisectoral programme. The need to coordinate such work with that undertaken in the follow-up to chapter 6 of Agenda 21, entitled "Protecting and promoting human health", for which WHO has been designated task manager should also be taken into account. In addition, poverty and malnutrition may be linked to greater health risks for a larger number of people (particularly in developing countries) than tobacco, a question that multisectoral priorities may have to take into account.

26. FAO also submitted a position paper on tobacco cultivation, which was drawn up some years ago and still serves as the current guideline for FAO work in the sub-sectors (see annex II).

3. United Nations Conference on Trade and Development

27. The UNCTAD secretariat is in the process of preparing a report in pursuance of paragraph 6 of Council resolution 1993/79, in which the Council suggested that a review of and recommendations concerning the impact of tobacco production on the economy of tobacco-producing countries, in particular those that depend on tobacco as a major source of income, as well as the impact of tobacco consumption on health, be included in the multisectoral collaboration work coordinated by the focal point.

28. The UNCTAD report will deal exclusively with the economies of tobacco producing countries and will cover the following areas:

(a) Production and export earnings: involving a detailed analysis of national and global statistics of the tobacco sector;

(b) Income, employment and resources used in tobacco production and manufacturing: growers' and manufacturers' earnings and total earnings

expressed as percentages of GDP; net returns of costs; discussion of labour and skills; analysis of the workforce and/or workers dependent on income from tobacco; numbers employed expressed as a percentage of national workforce and/or those dependent as percentage of total population; discussion of the size of holdings, tenure and distribution of benefits, regional and social significance of production and manufacturing etc.; wood and other fuels used in flue curing; irrigation and other resources used;

(c) Government revenue from tobacco and subsidies for tobacco production: taxation at all levels and income from State-run marketing boards; discussion of taxation of ancillary services; revenues directly and indirectly derived from tobacco expressed as a percentage of total government revenues and allocation of tax revenues; subsidies through agricultural support programmes etc.

29. Furthermore, depending on the availability of extrabudgetary resources, the UNCTAD secretariat envisages making a contribution to the implementation of the objectives listed in operative paragraph 7 of Council resolution 1993/79, in which the Council invited Member States and organizations of the United Nations system to develop a range of options, including bilateral and effective multilateral collaboration on the agricultural diversification or development of other economic alternatives to tobacco agriculture, as appropriate, to assist economies for which tobacco is a major export and where demand for their tobacco products has decreased as a result of successful strategies for tobacco control.

4. United Nations Children's Fund

(a) Policy/strategy

30. UNICEF will continue to place the prevention of the use of tobacco substances within the overall context of its current programming efforts to promote and maintain the health and development of children and youth. Children, as defined by the Convention on the Rights of the Child, suffer from both the direct and also the indirect effects of tobacco use. In view of the relationship between tobacco use and other youth health lifestyle issues, including the abuse of alcohol, illicit substance use and sexual issues such as human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), unintentional teenage pregnancies and sexually transmitted diseases (STDs), UNICEF has adopted a comprehensive and integrated approach to responding to the problem.

31. Priority target populations will include children and youth both in and out of school and children and youth in especially difficult circumstances, particularly street children and youth.

32. UNICEF has identified a number of strategic programming countries (SPCs), in which exceptional efforts will be made to accelerate programming that responds to the needs and concerns of young people in order to demonstrate proof of principle and develop the UNICEF programming approach in the area of youth health and development. Those SPCs will in turn be provided with a process of peer support and review through technical support groups (TSGs), which meet

regularly on a time-limited basis and include relevant staff from UNICEF, WHO and key organizational and technical partners.

33. TSGs with specific relevance to tobacco use are Youth Health and Development Promotion (YHD), School-based Interventions (SBI), and Mass Communication and Mobilisation (MCM). The following strategic programming countries or areas are involved: Bangladesh, Chile, Mali, Mauritania, Morocco, the Philippines, Rwanda and Uganda, (YHD); Burundi, Cameroon, the Caribbean, Sri Lanka, Thailand and Zimbabwe (SBI); Côte d'Ivoire, Egypt, Honduras, Kenya, Senegal and South Africa (MCM). Key organizational and technical partners include WHO (Adolescent Health Programme, Division of Mental Health, Division of Health Education, and Global Programme on AIDS), the Pan American Health Organization, UNESCO, the World Bank and the Young Women's Christian Association.

(b) Actions planned

34. Data collection at the national level will continue through the situation analyses that are being initiated or are under way in the SPCs. Those situation analyses bring together the health, education and youth sectors (both governmental and non-governmental), young people and key partners in order to identify the most important unmet needs and define priorities for action. Policy reviews are also being undertaken in order to identify ways to create a social and political environment that is more supportive to the health and development of children and youth.

35. Programmes (including relevant training and operational research) that focus on the health and development of youth will continue to be strengthened and developed, both in and out of school. That will also involve the use of the media to raise issues for dialogue and debate in society at large, issues related to the social values and norms that underlie many of the problems that young people face, including substance use and abuse.

36. Particular emphasis will be placed on skills-based education; improving referral and the utilization by young people of quality services, including school health services and counselling; strengthening the participation of young people in all stages of programme development and contributing to the development of partnerships between youth and adults; and mobilizing youth and women's organizations and strengthening the linkages between them and the people responsible for planning and providing services in the health, social welfare and education sectors.

37. The many UNICEF programmes that focus on children and youth in especially difficult circumstances will continue to strengthen the components of their programmes that focus on tobacco issues.

38. At a global level, UNICEF will continue to take advantage of opportunities for advocacy on the issue of tobacco through the Office of the Executive Director and through strengthening relevant sections of publications that are currently produced and disseminated by UNICEF, including Facts for Life, The Progress of Nations, and The State of the World's Children. Additional efforts will also be made to explore the likely impact of tobacco use on the achievement

of the goals of the World Summit for Children. UNICEF will participate in the forthcoming International Conference on Tobacco or Health, to be held in Paris in October 1994.

39. Finally, UNICEF will continue its current strategy of mobilizing and linking with other organizations. It will strengthen its existing partnerships and identify new opportunities for collaboration, both with other intergovernmental organizations and also with non-governmental organizations that focus on health and development tobacco use.

5. United Nations Industrial Development Organization

(a) Position on tobacco or health programmes

40. UNIDO is ready, subject to the availability of funds, to provide advice to Member States at their request, in accordance with Council resolution 1993/79.

41. UNIDO fully agrees that a review of and recommendations concerning the impact of tobacco production on the economy of tobacco-producing countries be included in the multisectoral collaboration work coordinated by the focal point.

42. However, the UNIDO position on the reduction of tobacco production is based on the fact that tobacco growing is just one component in an agro-industrial system and that any adequate alternative must address all aspects of the entire system, including the marketing aspect.

43. Therefore, UNIDO would suggest preparing a comprehensive study on the impact of the entire tobacco agro-industrial system on the economies of countries involved in its production, in terms of agricultural and industrial outputs, contribution to the gross domestic product and the national budget, tax revenues, and employment in both the agricultural and the industrial sectors. While phase I of such a study should deal with the agricultural aspects of the tobacco industry and would probably be best undertaken by FAO, phase II should deal with all aspects concerning the manufacturing industry and would thus fall within the agro-based industries field of activities of UNIDO.

(b) Activities planned for 1994

44. The following activities are planned:

(a) UNIDO will hold discussions with the focal point of the United Nations system at UNCTAD, Geneva, concerning the preparation and implementation of phase I of the above-mentioned study;

(b) As to phase II of the study, UNIDO will prepare and submit to donor countries a project document that will examine the impact of tobacco reduction on the GDP of selected tobacco growing and processing countries, with special emphasis on developing countries. Phase II of the study will evaluate industrial outputs, the contribution to gross domestic product and to the national budget etc. It will also evaluate the impact of tobacco reduction in

terms of jobs and taxes and will propose practical alternatives in the area of high value-added agro-industrial processed products;

(c) UNIDO will also provide support to:

(i) The United Nations Secretariat and UNCTAD, in all activities undertaken by the United Nations focal point on tobacco or health;

(ii) The World Bank, in implementing tobacco control activities, as stated in its World Development Report 1993: Investing in Human Health.

(c) Resources

45. The activities described in paragraph 44 above will be implemented with current resources from the UNIDO regular budget, with the exception of the project mentioned under subparagraph (b), which will be subject to the availability of extrabudgetary funds.

6. International Civil Aviation Organization

46. The Assembly of the International Civil Aviation Organization (ICAO), at its twenty-ninth session, on 8 October 1992, adopted resolution A29-15, entitled "Smoking restrictions on international passenger flights" (see annex III). Given the fact that 7 December 1994 marks the fiftieth anniversary of the signing of the Convention on International Civil Aviation in Chicago, a date declared International Civil Aviation Day, the ICAO Secretary-General has called on Member States to take steps by that date towards implementing the smoking ban for all flights.

47. At the present time, ICAO is complying with the request of its Assembly that the ICAO Council intensify its studies into the safety aspects of banning smoking on board aircraft. As part of those studies, the ICAO secretariat is sending a questionnaire to ICAO member States asking for information on their experience, concerns, views and intentions related to smoking bans on board aircraft. It plans to complete its analysis of States' replies by May 1994, at which time it will be able to report further on the findings from the study.

48. In the same resolution, the ICAO Assembly also requested the ICAO Council, with the assistance and cooperation of WHO, to take appropriate measures to promote a smoke-free travel environment on all international flights. ICAO is fully committed to the United Nations multisectoral collaboration on tobacco or health.

7. International Labour Organization

49. ILO indicated that as a tripartite organization in which workers' and employers' organizations are represented on an equal footing with Governments, its contribution to the joint effort would consist principally in helping to make relevant information available to workers and employers. Although it will

not be submitting a specific work plan, it stands ready to promote widespread public awareness of multisectoral collaboration in the area.

8. United Nations Educational, Scientific and Cultural Organization

50. UNESCO noted that its programme against drug abuse is aimed at the prevention through education of the abuse of both illicit and licit drugs, including tobacco. In conformity with the orientation of that programme, UNESCO has supported the actions of other institutions on tobacco control. In addition, the UNESCO Medical Service, in cooperation with the Preventive Education Unit and the Bureau of Personnel, has set up a task force to reflect upon the programme of tobacco in the workplace. A survey among staff members resulted in a partial restriction on smoking within UNESCO, as decided by the Director-General. UNESCO is ready to cooperate with the focal point in matters relevant to education for the prevention of the abuse of tobacco in fulfilment of Council resolution 1993/79.

9. United Nations Secretariat

51. The Statistical Division of the United Nations Secretariat (UNSTAT) has worked closely for many years with WHO to improve the compilation and dissemination of statistics on tobacco production, consumption and trade, and on the incidence of smoking. Available data are published regularly in general statistical publications, such as the Statistical Yearbook, The World's Women: Trends and Statistics, Compendium of Social Statistics and Indicators and the Industrial Statistics Yearbook. UNSTAT is also considering publishing available data in its Women's database (WISTAT), to be issued in 1994. UNSTAT also provides WHO with general economic and social data for the analysis of tobacco and smoking in their social and economic context. Thus, UNSTAT would like to be actively involved in any multisectoral activities undertaken in the field pursuant to Council resolution 1993/79 with a view to further developing that very important area of statistics.

B. Summary of responses from other intergovernmental organizations

52. In addition to the above-mentioned organizations and bodies of the United Nations system, the focal point also contacted the following 31 intergovernmental organizations, of which those marked with an asterisk had replied at the time of the preparation of the present report:

African, Caribbean and Pacific Group of States

African Development Bank*

Arab Bank for Economic Development in Africa

Arab Fund for Economic and Social Development*

Arab League Educational, Cultural and Scientific Organization

Arab Organization for Agricultural Development

Arab Maghreb Union

Asian Development Bank

Board of the Cartagena Agreement*

Caribbean Community*

Caribbean Development Bank*

Commonwealth Secretariat*

Cooperation Council of the Arab States of the Gulf*

Council of Arab Economic Unity

Economic Community of the Great Lakes Countries

Economic Community of West African States

European Free Trade Association

European Union*

Inter-American Development Bank*

International Bank for Economic Cooperation

International Investment Bank

Islamic Development Bank*

Latin American Economic System*

Latin American Integration Association

OPEC Fund for International Development*

Organization for Economic Cooperation and Development

Organization of African Unity*

Organization of American States

Permanent Observer of the League of Arab States

Permanent Secretariat of the General Treaty on Central American Economic Integration

West African Economic Community

53. In general, the organizations contacted were supportive of the text and objectives of the Council resolution 1993/79.

54. The European Commission welcomes the United Nations initiative on tobacco or health and hopes that it will be able to contribute to the furtherance of Council resolution 1993/79 within the European region.

55. The European Commission has for several years now been involved in the fight against tobacco use within the framework of its "Europe against cancer" programme. The European Council, in July 1986, adopted a programme of action of the European Community against cancer. The success of the first action plan (1987-1989) led to the adoption of a second action plan (1990-1994), and a proposal for a third action plan (1995-1999) has recently been adopted by the European Commission and should be formally adopted by the Council by the end of 1994.

56. The Commission has supported the fight against smoking in the Member States of the European Union through a wide variety of measures. In particular, a number of legislative measures have been adopted aimed at controlling the use of tobacco products, including directives of the European Council that regulate the labelling of tobacco products and the tar content of cigarettes, the banning of advertising tobacco products on television in all European member States since October 1991, as well as a resolution that invites Member States to adopt measures to restrict smoking in public places.

57. The "Europe against cancer" programme has also done much to encourage greater exchange of information and cooperation between organizations involved in the fight against smoking in the various member States. Those organizations generally meet twice a year at the regional level under the auspices of the cancer programme.

58. In 1988 the European Bureau for Action on Smoking Prevention (BASP) was created in the framework of the "Europe against cancer" programme and is now established as a centre of information on the fight against smoking in Europe.

59. The African Development Bank, the Caribbean Development Bank, the Inter-American Development Bank and the Islamic Development Bank replied that although they had provided some financing to tobacco activities in the past, they had stopped supporting tobacco projects. The Caribbean Development Bank reported that a loan had been made to a company engaged in tobacco operations to assist it in diversification away from tobacco. The Islamic Development Bank noted that Turkey was the only member of the Bank that produced tobacco and that its production was becoming less significant. It also reported that the Bank had been encouraging its staff to quit smoking and that it expected smoking to be eventually eliminated on the premises of its headquarters.

60. The Caribbean Community had adopted specific policy decisions to tackle the problems of drug and substance abuse. The Commonwealth health ministers discussed the topic of tobacco or health in their pre-World Health Assembly meeting in 1990 and their comments were later incorporated into the resolution adopted by the World Health Assembly of May 1992. The ministers of finance of the Cooperation Council of the Gulf Arab States, at their 32nd meeting, held in November 1992, decided that all member countries should levy a 50 per cent tariff rate or its equivalent on all types of tobacco and its derivatives. The Organization of African Unity indicated its willingness to cooperate in the implementation of Council resolution 1993/79.

61. The Arab Fund for Economic and Social Development, the Board of the Cartagena Agreement, the Latin American Economic System and the OPEC Fund for International Development indicated that their mandates did not include specific reference to tobacco.

C. Summary of responses from non-governmental organizations

62. Finally in compliance with operative paragraph 3 of Council resolution 1993/79, 56 relevant non-governmental organizations were contacted and replies were received from the following 20:

American Cancer Society

Action on Smoking or Health

L'Association africaine d'Education pour le Développement

Le Comité National français contre le Tabagisme

European Bureau for Action on Smoking Prevention

European Medical Association Smoking or Health

International Committee of the Red Cross

International Council on Alcohol and Addictions

International Council of Jewish Women

International Olympic Committee

International Organization of Consumers Unions

International Organization for Standardization

International Society and Federation of Cardiology

International Union against Cancer

International Union against Tuberculosis and Lung Disease

Non-Smokers' Rights Association

Women's International League for Peace and Freedom

World Conference on Tobacco and Health

World Organization of the Scout Movement

World Vision International

63. All the above-mentioned organizations welcomed the adoption of Council resolution 1993/79 and most of them showed a strong interest to further cooperate with the focal point. In their replies, they gave an account of their activities related to tobacco or health and gave information of their plans of work for the future. Their main activities are summarized below.

64. The American Cancer Society has developed a very comprehensive three-year plan of work on tobacco control that covers the areas of taxation, laws and regulations on clean indoor air, laws on the sale and distribution of tobacco to minors, the promotion of tobacco control at worksites, tobacco cessation initiatives, information on tobacco control and support to tobacco control programmes.

65. Action on Smoking or Health (ASH) of the United Kingdom of Great Britain and Northern Ireland collects and provides information on tobacco-related issues and is routinely consulted on smoking topics by government departments, parliamentary committees and members of parliament. It writes letters to ministers, public bodies, companies and the press. It holds press conferences, issues a twice-monthly bulletin and several other publications. In the last two years, ASH has concentrated very heavily on the issues of tobacco advertising and tobacco taxes, at both the national and European levels.

66. The Association africain d'éducation pour le développement, based at Lomé, Togo, is deeply concerned at tobacco-related problems and is continuously developing public awareness on the issue through its bulletin Famille et Santé.

67. The Comité National français contre le Tabagisme is at present trying to implement in France the second action plan proposed by WHO; it has prepared a French language version of the plan and has distributed it widely among decision makers.

68. The European Bureau for Action on Smoking Prevention (BASP), with headquarters in Brussels, works as a centre of information on the fight against smoking in Europe. It collects and distributes information on smoking prevention activities catering to a large number of organizations and individuals involved in the fight against smoking in the countries of the European Union. It publishes both a quarterly newsletter and special reports and responds directly to inquiries. BASP also plays an advisory role to the Commission of the European Communities concerning the actions undertaken by the "Europe against Cancer" programme in the fight against smoking.

69. The European Medical Association Smoking or Health, based in Bordeaux, has created a network of people throughout Europe who can encourage health professionals in the campaign against smoking. Its aims are to convince health professionals that smoking is part of their medical field, to assist health professionals in helping their patients to stop smoking, to facilitate the prevention of smoking, to participate in health education and reform, to stimulate anti-smoking regulations in members' own countries, to promote a European policy against tobacco and to remind health professionals that they should set an example by being non-smokers.

70. The International Committee of the Red Cross welcomed the adoption of the resolution but indicated that its mandate did not include any specific reference to tobacco.

71. The International Council on Alcohol and Addictions (ICAA), based at Lausanne, Switzerland, had established a Section on Tobacco Dependence in 1992. One of the specific tasks spelled out for the Section is the promotion of an increasing awareness of the various aspects of tobacco dependence. It organized a plenary session on tobacco dependence at the Twentieth International Institute on the Prevention and Treatment of Drug Dependence, held in São Paulo, Brazil, in 1993. Future activities will concentrate on organizing scientific meetings to tackle research issues in the area of tobacco dependence at ICAA Institutes and Congresses.

72. The International Council of Jewish Women (ICJW), with headquarters in Ontario, is dealing with such subjects as education, health and welfare, environment, the status of women, youth and successor generations and is deeply concerned with the health and well-being of men, women and children world wide. Several ICJW resolutions have been adopted on the subject of drugs, alcohol and tobacco abuse, encouraging its numerous affiliates all over the world to work nationally and locally to support programmes of research, prevention, treatment rehabilitation and education for the problems of drug, alcohol and tobacco abuse and addiction.

73. The International Olympic Committee is interested in health aspects in general; together with WHO, it sponsored a conference on the theme "Sport for all and health for all", held in March 1994. For their part, the organizing committees of the Olympic Games are campaigning for "Tobacco-free zones".

74. The International Organization of Consumers Unions (IOCU), based in London, has a long history of campaigning against tobacco use. Through its offices in Latin America, Africa, Asia and the Pacific, its programmes for the developed economies and for economies in transition, and its 180 members world wide, it is in a strong position to campaign against smoking and to educate people about the dangers of tobacco. IOCU participates at congresses and workshops on anti-tobacco promotion and control strategies and carries out training and other activities.

75. The International Organization for Standardization (ISO), with headquarters in Geneva, reported that contacts were made between WHO and the ISO central secretariat at the end of 1993 in order to establish cooperation. It also suggested the appointment of an ISO representative to the focal point at UNCTAD.

76. The International Society and Federation of Cardiology, based in Geneva, carries out activities related to physicians and their role in the care of patients and the general public. It has conducted a study on the subject of smoking habits and physicians' attitudes towards smoking. It offers advice to member organizations on how to implement programmes against smoking. It has set up a small working group to work further on the issues of physicians and smoking prevalence.

77. The International Union against Cancer (IUAC), based in Geneva, is working with its 250 member organizations in over 80 countries in collaboration with governmental and non-governmental international agencies to change attitudes to tobacco use in society and to promote a comprehensive strategy to eradicate tobacco production, sales, promotion and use throughout the world. The IUAC Programme on Tobacco and Cancer was established in 1976 with the objectives of promoting an agreed international policy on tobacco control and providing expertise to advise on the analysis of local problems and the development of national programmes. The Programme has become a coordination centre for activities related to tobacco control throughout the world. Through international and national conferences, workshops, symposia and consultative visits, the IUAC provides assistance to member organizations and regional or national coordination groups in all matters related to the tobacco problem. Thanks to its International Computer Network Globalink, the IUAC has developed a very powerful means of communication between like-minded organizations and individuals and has facilitated coordination between tobacco-control advocates and those active in cancer control and public health.

78. The International Union against Tuberculosis and Lung Disease (IUATLD), based in Paris, has conducted surveys on smoking habits among medical students and has published its findings. Its Scientific Committee on Tobacco or Health publishes a yearly newsletter and organizes different activities throughout the year. The main activity of the IUATLD for 1994 will be the Global Congress on Tuberculosis and Lung Disease, which will be held in June in Mainz, Germany.

79. The Non-Smokers' Rights Association, located in Toronto, indicated that it has a long history of cooperation with international efforts to control tobacco. However, it stated that it was not currently in a position to commit itself to additional collaboration and responsibility.

80. The Women's International League for Peace and Freedom Organization, based in Geneva, is interested in tobacco-related problems, particularly as they affect women. It has informed its membership at the grass-roots level of the issues surrounding tobacco and health and has distributed information within the community of the non-governmental organizations, particularly to the Committee on the Status of Women and the Committee on Development, which are involved in the issues of primary health care and development.

81. The World Conference on Tobacco or Health aims to bring together the many large medical, governmental or non-governmental organizations that fight against tobacco problems. The Conference covers a very wide range of subjects related to tobacco, such as prevalence, health, women, smoking cessation, policy development, taxes, advertising and economic development. The Ninth Conference on Tobacco or Health, organized with the help of WHO and sponsored by the

President of France, the President of the Commission of the European Community and the Director-General of the World Health Organization among others, will take place in Paris in October 1994.

82. The World Organization of the Scout Movement, based in Geneva, adopted a resolution at the World Scout Conference in 1993 to discourage the use and abuse of various substances, such as tobacco, alcohol and other drugs. It publishes several articles and information on youth and tobacco.

83. World Vision International, a Geneva-based non-governmental organization, has taken a strong stand on the issue of tobacco and is strongly opposed to the production, manufacture, sale and transportation of tobacco-related products, as well as to tobacco advertising, especially in the developing countries. It educates the people it serves against the danger of tobacco use and its policy is not to fund any project that calls for growing tobacco.

D. Contacts with Member States

84. At the time of the preparation of the present report, contact had been made with all 140 Member States that are currently represented at the United Nations and other international organizations in Geneva in order to inform them of the contents of Council resolution 1993/79 and to request information on their national policies pursuant to its objectives. That information will be vital for developing the comprehensive international strategies on tobacco or health called for in the resolution. Information has been obtained from different sources on legislative and administrative actions already taken by Member States in line with the objectives of the resolution. WHO recently reported that the following countries have enacted legislation banning tobacco advertising: Afghanistan, Algeria, Australia, Canada, Finland, France, Iceland, Italy, Lithuania, Mongolia, Mozambique, New Zealand, Norway, Papua New Guinea, Portugal, Singapore, Sudan, Thailand and Viet Nam. Several among them have advanced legal and administrative controls on smoking in public places. They have also launched comprehensive educational campaigns on the dangers associated with tobacco consumption; developed anti-smoking campaigns; imposed tobacco taxes with the specific purpose of reducing consumption; and allocated tax revenues to finance anti-smoking campaigns and for health care etc.

85. With the cooperation of Member States, the concerned international organizations will undoubtedly be in a much stronger position to assist in the implementation of the resolution.

III. CONCLUSION

86. The present interim progress report is largely meant to provide an inventory of activities in the United Nations system as well as relevant other intergovernmental and non-governmental organizations in the area of tobacco or health. As can be gleaned from the replies, a two-pronged approach is essential. That is, both the production and the consumption side of the issue have to be tackled simultaneously.

87. No single organization can hope to achieve the goals of Council resolution 1993/79; multisectoral collaboration of a wide range of national and international agencies will be required to ensure success. The United Nations focal point on tobacco or health is an ideal mechanism for ensuring that that multisectoral approach takes place in a timely and effective way. The United Nations and its specialized agencies, acting in concert with all bodies concerned, can do much to prevent the further spread of the tobacco epidemic.

88. Since the purpose of Council resolution 1993/79 is to develop effective multisectoral collaboration on tobacco or health leading to a rapid reduction in the burden of the disease and death caused by the tobacco pandemic, it is evident that the major task of the focal point is to coordinate action to that end. Work in that direction is already under way on the part of most of the organizations concerned with the issue of tobacco or health. However, as is evident from the responses of many of the organizations, further development of action plans will depend on the availability of the necessary resources. Similarly, to follow up and pursue the objectives of the resolution adequately, the capacity made available from within existing resources to carry out focal point and coordination functions will need to be complemented by additional resources to enable it to develop multisectoral approaches and strategies for tobacco control and render advice to Member States at their request. Efforts to raise resources from extrabudgetary sources have not been successful thus far. Unless such resources become available, it is difficult to envisage a full and effective response to the resolution. Nevertheless, the preliminary information contained in the present interim report should make it possible to envisage new directions from the Economic and Social Council concerning the implementation of its resolution 1993/79.

Annex I

LIST OF ORGANIZATIONS AND BODIES CONTACTED

United Nations entities and programmes

Department for Development Support and Management Services
Department for Economic and Social Information and Policy Analysis
United Nations Office at Geneva
United Nations Children's Fund
United Nations Conference on Trade and Development
United Nations Development Programme
United Nations Population Fund
United Nations Environment Programme
Office of the United Nations High Commissioner for Refugees
United Nations Relief and Works Agency for Palestine Refugees in the Near East
Economic Commission for Africa
Economic Commission for Europe
Economic Commission for Latin America and the Caribbean
Economic and Social Commission for Asia and the Pacific
Economic and Social Commission for Western Asia
United Nations Institute for Training and Research
United Nations Research Institute for Social Development
United Nations University

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International Trade Centre UNCTAD/GATT

Specialized agencies/IAEA and GATT

World Food Programme
International Labour Office
Food and Agriculture Organization of the United Nations
United Nations Educational, Scientific and Cultural Organization
International Civil Aviation Organization
World Health Organization
World Bank
International Monetary Fund
International Telecommunication Union
World Meteorological Organization
World Intellectual Property Organization
International Fund for Agricultural Development
International Maritime Organization
United Nations Industrial Development Organization
Universal Postal Union

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International Atomic Energy Agency
General Agreement on Tariffs and Trade

Annex II

POSITION PAPER OF THE FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS ON TOBACCO CULTIVATION

A. Background

The FAO secretariat shares the international concern over the growing evidence on the harmful effects of tobacco smoking and the rising incidence of smoking-related diseases, not only in developed countries but more recently also in developing countries. The World Health Organization has indicated that the medical evidence on the harmful effects of smoking is now well established. A WHO Expert Committee on Smoking Control, which met in Geneva in October 1978 in response to a resolution adopted by the World Health Assembly in May 1976, concluded that in any country where smoking was for a considerable period a common practice, it was a major, and certainly removable, cause of ill-health and premature death; and that the introduction and extension of the smoking habit in countries where it was not yet established would be followed by similar effects there.

Collaboration between WHO and FAO has been called for at several World Health Assemblies. The latest resolution, agreed at the Twenty-Ninth World Health Assembly in May 1976, requested the Director-General of WHO to continue, in cooperation with the United Nations and specialized agencies, to make all efforts deemed necessary to reduce smoking, and particularly to work out with FAO and the United Nations a joint strategy on crop diversification in tobacco growing areas.

The FAO secretariat strongly supports the work carried out by WHO to discourage smoking. This is the first priority, because in the FAO secretariat's view, over the longer term any efforts to reduce tobacco production are unlikely to be effective unless accompanied by measures to curtail demand.

In this connection, the FAO secretariat also stresses the importance of establishing procedures to monitor national action taken to ensure that WHO resolutions regarding smoking and health are implemented by Governments, and that the improvement of public health is included among longer-term development objectives at the national level.

B. Economic significance of tobacco

In response to growing demand, tobacco production has continued to increase and has achieved great economic significance.

The crop is grown in about 120 countries and territories in North and South America, Europe, Asia and Africa. Only in a few northern countries, such as in Scandinavia, is it impossible to grow the crop.

Since the early 1960s, world tobacco production has increased by more than 2 per cent annually to about 5.5 million tons in recent years. While output in developed countries has tended to decrease (mainly because of developments in the United States of America where support programmes and production quotas are in effect), in developing countries tobacco production increased by more than 2 per cent per year. This was due to the cost advantages enjoyed by developing countries and because the prices received were favourable to growers. As a result, by 1977 developing countries accounted for 60 per cent of world tobacco output, compared with about 52 per cent in the early 1960s. a/

The expansion in production in developing countries was stimulated by growing outlets in both domestic and export markets. Tobacco consumption in developing countries rose by about 2.5 per cent annually during the 1980s, while their net exports rose by nearly 4.0 percent per year. Earnings from the export of tobacco from developing countries now exceed US$ 1,200 million annually. Moreover, the value of raw tobacco exports represents a considerable proportion of the value of total agricultural exports in a number of countries. For example, earnings from tobacco account for more than 50 percent of earnings from all agricultural exports in Malawi and Zambia; they account for about 10 per cent in India and the Republic of Korea; and they account for 10 per cent in Paraguay.

Tobacco cultivation represents an important source of employment and cash income in all countries where the crop is produced. It is among the field crops with the highest returns per unit of area, and also has very high labour and capital input requirements, which make it difficult to switch to other crops. In developing countries, cultivation tends to be concentrated on very small holdings and the crop provides a livelihood for growers and undefined numbers of family members and other workers. Even in developed countries, where attempts are being made to extend mechanization, tobacco represents an important cash crop. In the United States of America, for example, in 1977 there were 276,000 farms producing tobacco, of which the average size was only 1.2 ha.; cash receipts from tobacco represented 5 per cent of the cash receipts from all crop sales. Among cash crops, tobacco ranked fifth in value after corn, soybeans, wheat and cotton.

Tobacco also represents a very important source of tax revenue. Tax receipts from tobacco stand at from 2 to 8 per cent of total tax receipts (including those on income and corporate profits) in the countries of the European Community; about 3 per cent in Canada and Sweden; and about 1 per cent in the United States. In the latter, total revenue from the taxation of tobacco products amounted to US$ 6,200 million in 1977, or 14 per cent of all excise tax receipts. This amount was about 40 per cent of total consumer expenditure for tobacco products and three times total gross farm earnings from the sale of unmanufactured leaf. Also, in developing countries various taxes are levied on tobacco products and represent an important source of revenue.

Because of its importance as a source of rural employment, cash income, government revenue, as well as of foreign exchange earnings and savings on expenditure on imported leaf and products, tobacco cultivation is widely supported or controlled by Governments throughout the world. In developed countries, where producers are increasingly facing competition from lower cost

producers in developing countries, tobacco production tends to be supported and regulated to give producers certain guarantees as regards employments and standards of living.

As a result, tobacco cultivation in developing countries may be of fundamental importance in achieving short- and medium-term development objectives. In view of the great significance of tobacco and the rising demand and favourable prices, the ultimate objective to reduce tobacco production is necessarily a long-term process. Any rapid movement in this direction would not only be impracticable but would probably lead to a serious dislocation of economic resources in the countries concerned.

C. FAO tobacco-related activities

FAO, in its work to improve agriculture and the condition of rural populations, is periodically called upon by member Governments to provide assistance for agricultural development and technical advice for tobacco cultivation and marketing. However, since the May 1976 WHO resolution on smoking and health, FAO has not encouraged any activities leading to project formulation for this commodity and the number of ongoing UNDP-supported tobacco projects, in which FAO is involved, is now considerably less than it was three years ago. Nevertheless, as part of its regular commodity analysis work, FAO maintains a continuing watch on trends in production, demand and trade for tobacco.

D. FAO position

The present position of the FAO secretariat concerning the promotion and improvement of tobacco cultivation is accordingly described below.

1. Support to WHO in its efforts to discourage demand for tobacco

Unless the growth of demand can be curtailed, tobacco will remain a highly profitable crop and any efforts to reduce its production will be unsuccessful. Hence, it is necessary to intensify action to curtail the consumption of tobacco. FAO will invite WHO to all sessions of FAO intergovernmental groups or panels dealing with tobacco so that WHO may draw attention to its work on the danger of smoking. Also, emphasis should be placed on the need for developed producing countries, where considerable resources and economic alternatives are available, to investigate the possibilities of reducing the special assistance given to domestic tobacco production. FAO suggests that greater emphasis be placed on this matter in future WHO resolutions and recommendations issued by its assemblies and expert working groups.

2. FAO cooperation with WHO

FAO is cooperating with WHO in establishing an objective basis for evaluating the economic benefits of tobacco production and trade versus the health costs of smoking. In the first instance, the FAO contribution to this joint project will be a study of the economic significance of tobacco production and trade in selected countries. FAO will also participate, when appropriate, in WHO meetings and assemblies at which the problems associated with tobacco and smoking are discussed.

3. FAO action affecting production

While FAO is required under its constitution to promote the production and distribution of all food and agricultural products and to provide such technical assistance as Governments may request, FAO cannot fail to take account of the internationally recognized hazards of tobacco smoking and United Nations resolutions on the subject.

General agricultural planning and policy development

Therefore, FAO will continue its past policy of not encouraging any activities leading to project requests and formulation for this commodity. In its work to assist Governments in the elaboration of agricultural development projects, including smallholder production schemes, crop diversification and commodity policies, FAO will take into account the harmful effects of tobacco smoking on health and therefore the general undesirability of encouraging production of the commodity. However, after careful consideration of the situation in individual countries, including, where applicable, the conditions and prospects of established tobacco industries or the unsuitability of alternative crops, FAO cannot exclude recommending development of the crop, in such cases where overriding economic considerations so warrant.

Technical assistance

On receipt of requests by Governments for technical assistance, or preparation of investment projects specifically for tobacco cultivation, FAO will:

(a) Review the economic importance of the crop to the country concerned and the extent to which the Government has already undertaken specific commitments for developing tobacco production, taking into account general development needs; in cases where tobacco is of overriding economic and rural importance and where assistance is requested for the improvement of existing production and marketing systems, FAO will consider the provision of technical assistance, in accordance with its normal procedure and within the limits of resources available;

(b) In the case of new tobacco development schemes (i.e., where tobacco was not previously an established crop), FAO will draw the attention of the Government and the financing agency concerned to the WHO resolutions concerning smoking and health and will offer its services to first explore the

possibilities for the cultivation of alternative crops, which might provide closely comparable economic benefits in the context of national development objectives;

(c) In cases where it is neither feasible nor acceptable to grow alternative crops, FAO will, wherever appropriate, recommend the possibility of producing mild leaf, market requirements for which are constantly growing, for the manufacture of less hazardous tobacco products.

Diversification from tobacco

FAO stands ready, subject to the availability of funds, to assist any Government that requests investigation of the possibility of diversification from tobacco production.

Notes

a/ Excluding Asian centrally planned economies: 41 and 35 per cent, respectively.

Annex III

RESOLUTION A29-15 OF THE INTERNATIONAL CIVIL AVIATION ORGANIZATION: SMOKING RESTRICTIONS ON INTERNATIONAL PASSENGER FLIGHTS

Whereas ICAO Assemblies have demonstrated a concern for and a contribution to human welfare in the quality of life and in the environment in which human beings work and engage in other pursuits, including matters related to engine emission, the ozone layer and aircraft noise,

Whereas ICAO Assemblies have recognized a responsibility to achieve maximum compatibility between civil aviation operation and the quality of the human environment,

Whereas States have been recognizing increasingly and taking action against the known health hazards caused by tobacco smoke at the work place, in public buildings and transportation systems,

Whereas the build-up of "tar" and other residue from tobacco smoke on aircraft may adversely affect oxygen masks and contaminate environmental control systems,

Whereas the World Health Organization (WHO) and the International Labour Organization (ILO) consider that occupational safety and health are interrelated and cannot be separated, and

Whereas the World Health Organization (WHO) unanimously adopted a resolution urging member States to ban smoking in public conveyances where protection against involuntary exposure to tobacco smoke cannot be ensured, and requested its Director-General to collaborate with ICAO,

The ICAO Assembly:

1. Requests the ICAO Council to intensify its studies into the safety aspects of banning smoking on board aircraft;

2. Requests the ICAO Council, with the assistance and cooperation of the World Health Organization, to take appropriate measures to promote a smoke-free travel environment on all international flights;

3. Urges all Contracting States, in the meantime, to take necessary measures as soon as possible to restrict smoking progressively on all international passenger flights, with the objective of implementing complete smoking bans by 1 July 1996;

4. Requests the ICAO Council to report on the implementation of this resolution in all its aspects to the next ordinary session of the Assembly.